

## **Township of North Brunswick** Fire Marshal's Office 710 Hermann Road North Brunswick, NJ 08902

(732) 247-0922 x 453 Fax: (732) 289-3440

## APPLICATION FOR REGISTRATION OF BUSINESS

(please print or type all information)

## The Uniform Fire Code states:

The owner of all businesses, occupancies, buildings, structures, or premises required to be inspected under Section 19A.12.1 shall apply annually to the Local Enforcing Agency for a Certificate of Registration upon forms provided by the Fire Official. It shall be a VIOLATION of this ORDINANCE for any owner to fail to return such forms to the Local Enforcing Agency and/or Fire Official within thirty (30) days of receipt.

19A13.2 office use only Local I.D. #:\_\_\_\_\_ State I.D. #:\_\_\_\_\_ Date Registered:\_\_\_\_\_ Business Name: Contact Name: Street Address: Phone Number:\_\_\_\_\_ Federal ID #: \_\_\_\_\_ Do you..... OWN or LEASE the property (circle one) Building Owner's Name: Street Address: \_\_\_\_\_\_ Phone Number:\_\_\_\_ Federal ID#: Business Type: Individual [ ] Partnership [ ] Corporation [ ] Other [ ] Please indicate where all correspondence, actions, orders or notices are to be sent:

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| Emergency Contacts  | <b>5.</b>   |
|---|---|
| #1 Name:<br>Address:  | Phone Number  |
| Address:  | Phone Number  |
| Address:  | Phone Number  |
| Monitoring Company Nar<br>Phone Number:<br>Description of use                 | occupancy of this building / business:  |
| I hereby acknowledge that correct, that I am the own such hereby agree to com | at I have read this application, that the information given is her or duly authorized to act in the owner's behalf, and as ply with the applicable requirements of the uniform fire specific conditions imposed by the Fire Official. |
| Print Name  | Signature   |
| <br>Title   | <br>Date  |